### **Application Data Sheet**

#### **Application Information**

Application Type:: Regular Subject Matter:: Utility Suggested Classification:: 602/17

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Title:: "CRANIAL ORTHOSIS FOR PREVENTING

POSITIONAL PLAGIOCEPHALY IN INFANTS"

Attorney Docket Number:: B6226.1615.4370

Request for Early Publication?:: Yes
Request for Non-Publication?:: No
Suggested Drawing Figure:: 10
Total Drawing Sheets:: 5
Small Entity?:: Yes
Petition Included?:: No

Petition Type::

Licensed US Govt. Agency:: No Secrecy Order in Parent Appl?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor Primary Citizenship Country:: US

Status:: Full Capacity
Given Name: Frederick

Middle Name::

Family Name:: SKLAR

City of Residence:: Waxahachie

State or Province of Residence:: Texas Country of Residence:: US

Street of Mailing Address:: 1935 Motor Street, Suite D360

City of Mailing Address:: Dallas

State or Province of

Mailing Address:: Texas
Country of Mailing Address:: US

Postal or Zip Code

of Mailing Address:: 75235

### **Application Data Sheet**

Applicant Authority Type:: Inventor Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Paul Middle Name:: C.

Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

US

HOBAR

Dallas

Texas

US

Street of Mailing Address:: 411 North Washington Avenue, Suite 6000

City of Mailing Address:: Dallas

State or Province of

Mailing Address:: Texas
Country of Mailing Address:: US

Postal or Zip Code

of Mailing Address:: 75246

## **Correspondence Information**

Correspondence
Customer Number::

Name:: Dennis T. Griggs

Street of Mailing Address:: 17950 Preston Road

Suite 1000

000378

City of Mailing Address:: Dallas

State or Province of

Mailing Address:: TX
Country of Mailing Address:: US

Postal or Zip Code

of Mailing Address:: 75252

Phone Number:: (972) 447-4569 Fax Number:: (972) 732-9218

E-Mail Address:: dennis@griggslaw.com

## **Application Data Sheet**

# Representative Information

Representative Customer Number::	000378
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Representative Designation::	Registration Number::	Name::
Primary	27,790	Dennis T. Griggs
Associate	48,331	Scott T. Griggs

# **Assignment Information**

Assignee Name:: INFA-SAFE, Inc.

Street of Mailing Address:: 6631 Lange

City of Mailing Address:: Dallas

State or Province of Mailing Address:: Texas

Country of Mailing

Address:: U.S.

Postal or Zip Code of Mailing Address:: 75214